
COMBINED DECLARATION and POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TITLE OF INVENTION²

Method and Apparatus for Facial Image Acquisition and Recognition

SPECIFICATION IDENTIFICATION

the specification of which:

(complete (a), (b), or (c))

(a) ☒ is attached hereto.

(b) ☐ was previously filed _____, as United States Patent Application Serial No. _____.

(c) ☐ was previously filed _____, as PCT International Application No. _____ and was amended under PCT Article § 19 on _____ *(if any)*.

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claim(s), as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose all information which is material to patentability as defined in 37 C.F.R. § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

FOREIGN PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35 U.S.C. § 119(a)-(d) or (f) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application(s) which designated at least one country other than the United States of America listed below and have also identified, by checking the box, any foreign application(s) for patent or inventor's certificate or any PCT international application(s) having a filing date before that of the application(s) on which priority is claimed.

(complete (d) or (e))³

before that of the application(s) on which priority is claimed.

(complete (d) or (e))³

(d) ☐ no such applications have been filed.

(e) ☒ such applications have been filed as follows.

Note: Where item (c) is entered above and the International Application claims priority to a non-U.S. application, check item (e), enter the non-U.S. priority details below, and make the priority claim.

COUNTRY	APPLICATION NUMBER	DATE OF FILING (month, day, year)	PRIORITY CLAIMED UNDER § 119 or § 365	
CN	200310121340.1	December 12, 2003	<input checked="" type="checkbox"/> YES	NO <input type="checkbox"/>
			<input type="checkbox"/> YES	NO <input type="checkbox"/>
			<input type="checkbox"/> YES	NO <input type="checkbox"/>
			<input type="checkbox"/> YES	NO <input type="checkbox"/>

POWER OF ATTORNEY

I hereby appoint as my attorneys and/or patent agents all attorneys and/or patent agents listed under the following Customer Number, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

022913

PATENT TRADEMARK OFFICE
CUSTOMER NUMBER

All correspondence and telephonic communications should be directed to:

R. BURNS ISRAELSEN
Registration No. 42,685
Telephone (801) 533-9800
Facsimile (801) 328-1707

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)⁴

NOTE: Carefully indicate the family (or last) name, as it should appear on the filing receipt and all other documents.

Full name of sole or first joint inventor

(GIVEN NAME) (MIDDLE INITIAL OR NAME – IF ANY) GAO

FAMILY (OR LAST NAME)
Inventor's signature 高奇
Date 06/02/2006 Country of Citizenship P.R. China
Residence Beijing China
(city) (State or Country)
Mailing Address Rm 2008, Block B, Bixing Yuan, Zhi Chun Road, Haidian District,
Beijing 100088, China

Full name of second joint inventor, if any

(GIVEN NAME) (MIDDLE INITIAL OR NAME – IF ANY) FAMILY (OR LAST NAME)

Inventor's signature
Date _____ Country of Citizenship _____
Residence _____
(city) (State or Country)
Mailing Address _____

Full name of third joint inventor, if any

(GIVEN NAME) (MIDDLE INITIAL OR NAME – IF ANY) FAMILY (OR LAST NAME)

Inventor's signature
Date _____ Country of Citizenship _____
Residence _____
(city) (State or Country)
Mailing Address _____

Full name of fourth joint inventor, if any

(GIVEN NAME) (MIDDLE INITIAL OR NAME – IF ANY) FAMILY (OR LAST NAME)

Inventor's signature
Date _____ Country of Citizenship _____
Residence _____
(city) (State or Country)
Mailing Address _____

**INSTRUCTION SHEET FOR
COMBINED DECLARATION and POWER OF ATTORNEY**

General. The attached document is designed to be completed and signed by each of the inventors for filing with a utility patent application, design patent application, or nationalizing a PCT application each in the United States.

Footnotes. The instructions listed below correspond to the footnotes in the document:

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1. The Attorney Docket No. references our internal docket number and is completed by Workman Nydegger upon receipt of the application.
 2. Insert the title of the invention.
 3. Mark Section (d) if the present application is not claiming priority to any other applications. Mark Section (e) if the present application claims priority to an earlier filed non-U.S. application.
 4. Complete both the "Residence" and "Mailing Address." At "Residence," insert only the city and state or country. A full address is not required. The "Mailing Address" need not be a residence address but can be any address, including a PO Box, where correspondence can be received.